



CALIFORNIA DEPARTMENT OF
Mental Health

Audits Section – Bay and Central Region
11401 South Bloomfield Avenue, Unit 203, 2nd Floor
Norwalk, CA 90650
(562) 406-3929, FAX (562) 406-3951

March 21, 2008

Meloney Roy, LCSW, Director
Ventura County Behavioral Health Department
1911 Williams Drive, Suite 200
Oxnard, CA 93036

Dear Ms. Roy:

AUDIT REPORT – VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT

We have conducted a desk examination of the Short-Doyle/Medi-Cal Cost Reporting and Data Collection (CR/DC) report of Ventura County Behavioral Health Department for the fiscal period July 1, 2002 to June 30, 2003. Our examination was made in accordance with Section 14170 of the Welfare and Institutions Code and was limited to a review of SD/MC units of service, Mode costs and Administrative costs.

In our opinion, the amount shown in the accompanying Summary of Net Federal Share of Federal Short-Doyle/Medi-Cal Program Costs and State General Fund under EPSDT program (Schedule 1) represents the actual net program costs allowable under the above mentioned statutes.

The effect of this revised allowable program costs is as follows:


	<u>Net Program Costs</u>		
	<u>Settled</u>	<u>Allowed</u>	<u>Adjustment</u>
Federal Share of Short-Doyle/Medi-Cal	\$ 12,793,613	\$ 11,981,620	\$ (811,993)
Federal Share of Healthy Families/Medi-Cal	\$ 0	\$ 675	\$ 675
State General Funds EPSDT Due State	\$ 1,863,646	\$ 1,802,023	\$ (61,623)

If you disagree with any of the results of this audit, you may request an informal appeal conference. This request must be in writing and received by the Department of Health Services within sixty (60) calendar days following the date of receipt of this report.


Meloney Roy, Director
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Your notice of disagreement should be directed to Vicki Orlich, Chief, Administrative Appeals, Office of Legal Services, Department of Health Services, 1029 J Street, Suite 200, Sacramento, California 95814, and be in conformance with provisions of Sections 51016 and sequence, Title 22, of the California Code of Regulations.

Sincerely,

for 

WALTER J. HILL, JR., MBA, EA
Chief of Audits



RAQUEL E. RIOS, Supervisor
Audits Section – Southern Region

Enclosures

CERTIFIED MAIL

SCHEDULE 1

VENTURA
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF NET REIMBURSABLE MEDI-CAL PROGRAM COSTS
FISCAL YEAR ENDED JUNE 30, 2003

		As Settled	Audit Adjustments	As Audited
<u>NET REIMBURSABLE MEDI-CAL</u>				
<u>PROGRAM COSTS</u>				
<u>COUNTY PROVIDERS</u>				
MEDI-CAL - FFP	(Sch. 2a)	\$ 10,490,807	\$ (757,745)	\$ 9,733,062
HEALTHY FAMILIES - FFP	(Sch. 2a)	0	675	675
TOTAL FFP - COUNTY PROVIDERS		\$ 10,490,807	\$ (757,070)	\$ 9,733,737
<u>CONTRACT PROVIDERS</u>				
MEDI-CAL - FFP	(Sch. 3b)	\$ 2,302,806	\$ (54,248)	\$ 2,248,558
HEALTHY FAMILIES - FFP	(Sch. 3b)	0	0	0
TOTAL FFP - COUNTY PROVIDERS		\$ 2,302,806	\$ (54,248)	\$ 2,248,558
<u>TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS</u>				
MEDI-CAL - FFP		\$ 12,793,613	\$ (811,993)	\$ 11,981,620
HEALTHY FAMILIES - FFP		0	675	675
TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS		\$ 12,793,613	\$ (811,318)	\$ 11,982,295
<u>SUMMARY OF STATE GENERAL FUNDS</u>				
EPSDT - SGF	(Sch 4)	\$ 1,863,646	\$ (61,623)	\$ 1,802,023

SCHEDULE 2

**VENTURA
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2003**

COUNTY OPERATED FEDERAL

		<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
<u>Total Medi-Cal Gross Reimbursement</u>				
1. Inpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	\$ 3,942,913	\$ (95,298)	\$ 3,847,615
2. Outpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	13,835,792	(302,468)	13,533,324
3. Enhanced SD/MC (Children) - I/P	(MH1968, Ln 16, 16A)	0	0	0
4. Enhanced SD/MC (Children) - O/P	(MH1968, Ln 16, 16A)	0	44,293	44,293
5. Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 22)	0	0	0
6. Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 22)	0	0	0
7. Healthy Families Gross Reimbursement-I/P	(MH1968, Ln 27, 27A)	0	0	0
8. Healthy Families Gross Reimbursement-O/P	(MH1968, Ln 27, 27A)	0	942	942
9. Total		<u>\$ 17,778,704</u>	<u>\$ (352,532)</u>	<u>\$ 17,426,173</u>

Less: Patient & Other Payor Revenues

10. Inpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	\$ 763,840	\$ 238,457	\$ 1,002,297
11. Outpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	101,557	(34,025)	67,532
12. Enhanced SD/MC (Children)-I/P	(MH 1968, Ln 29)	0	0	0
13. Enhanced SD/MC (Children)-O/P	(MH 1968, Ln 29)	0	0	0
14. Enhanced SD/MC (Refugees) - I/P	(MH1968, Ln 30)	0	0	0
15. Enhanced SD/MC (Refugees) - O/P	(MH1968, Ln 30)	0	0	0
16. Healthy Families Patient Revenue-I/P	(MH 1968, Ln 31)	0	0	0
17. Healthy Families Patient Revenue-O/P	(MH 1968, Ln 31)	0	0	0
18. Total		<u>\$ 865,397</u>	<u>\$ 204,432</u>	<u>\$ 1,069,829</u>

Medi-Cal Net Reimbursement for Direct Services

19. Inpatient SD/MC (Incl Children Enhanced)	(Ln 1,3 - Ln 10,12)	\$ 3,179,073	\$ (333,755)	\$ 2,845,318
20. Outpatient SD/MC (Incl Children Enhanced)	(Ln 2,4 - Ln 11,13)	13,734,235	(224,150)	13,510,085
21. Enhanced SD/MC (Refugees)-I/P	(Ln 5 - Ln 14)	0	0	0
22. Enhanced SD/MC (Refugees)-O/P	(Ln 6 - Ln 15)	0	0	0
23. Healthy Families-I/P	(Ln 7 - Ln 16)	0	0	0
24. Healthy Families-O/P	(Ln 8 - Ln 17)	0	942	942
25. Total		<u>\$ 16,913,307</u>	<u>\$ (556,964)</u>	<u>\$ 16,356,344</u>

Medi-Cal MAA Reimbursement

26. Service Functions 01-09	(MH1979, Ln 11, Col. A)	\$ 0	\$ 0	\$ 0
27. Service Functions 11-19, 31-39	(MH1979, Ln 12, Col. A)	0	0	0
28. Service Functions 21-19	(MH1979, Ln 13, Col. A)	0	0	0
29. Total		<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>

SCHEDULE 2a

**VENTURA
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2003**

COUNTY OPERATED FEDERAL

		<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
<u>Amount Negotiated Rates Exceed Cost</u>				
30. Inpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)	\$ 0	\$ 0	\$ 0
31. Outpatient SD/MC (Incl Children Enhan)	(MH 1968, Ln 38, 38A)	0	0	0
32. Enhanced SD/MC (Refugees)-I/P	(MH1968, Ln 39)	0	0	0
33. Enhanced SD/MC (Refugees)-O/P	(MH1968, Ln 39)	0	0	0
34. Healthy Families-I/P	(MH 1968, Ln 40, 40A)	0	0	0
35. Healthy Families-O/P	(MH 1968, Ln 40, 40A)	0	0	0
36. Total		<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>

Medi-Cal Administrative Reimbursement

37. Administrative Reimbursement Limit	(MH 1979, Ln 4)	\$ 3,568,768	\$ (68,997)	\$ 3,499,771
38. Medi-Cal Administration	(MH 1979, Ln 5)	\$ 2,449,703	\$ (762,319)	\$ 1,687,384
39. Medi-Cal Reimbursement	(Lower of Ln 37, Ln 38)	<u>\$ 2,449,703</u>	<u>\$ (762,319)</u>	<u>\$ 1,687,384</u>

Healthy Families Administrative Reimbursement

40. Healthy Families Administrative Reimbursement Limit	(MH1979, Ln 8)	\$ 0	\$ 94	\$ 94
41. Healthy Families Administration	(MH1979, Ln 9)	\$ 0	\$ 89	\$ 89
42. Healthy Families Administrative Reimbursement	(Lower of Ln 40, Ln 41)	<u>\$ 0</u>	<u>\$ 89</u>	<u>\$ 89</u>

Utilization Review Reimbursement

43. Skilled Professional	(MH1979, Ln 14, Col. D)	\$ 543,591	\$ (148,182)	\$ 395,409
44. Other Medi-Cal U.R.	(MH1979, Ln 15, Col. D)	<u>\$ 339,132</u>	<u>\$ (127)</u>	<u>\$ 339,005</u>

Net SD/MC Reimbursement - FFP

45. Direct Services	(MH1979, Ln 16,16A)	\$ 8,688,696	\$ (294,214)	\$ 8,394,482
46. Enhanced (Children)	(MH1979, Ln 17,17A)	0	28,828	28,828
47. Enhanced (Refugees)	(MH1979, Ln 18)	0	0	0
48. MAA	(MH 1979, Ln 11, 12 & 13)	0	0	0
49. Administrative Reimbursement	(MH1979, Ln 6)	1,224,852	(381,160)	843,692
50. U.R. Skilled Professional	(MH1979, Ln 14)	407,693	(111,136)	296,557
51. U.R. Other	(MH1979, Ln 15)	169,566	(64)	169,503
52. Negotiated Rate-Payback	(MH1979, Ln 20)	0	0	0
53. Subtotal- FFP		<u>\$ 10,490,807</u>	<u>\$ (757,745)</u>	<u>\$ 9,733,062</u>

54. Contract Limitation Adjustment	(MH 1979, Ln 22)	\$ 0	\$ 0	\$ 0
55. Quality Assurance Review Results	(Adj #)	0	0	0

56. Total SD/MC Reimbursement - FFP		<u>\$ 10,490,807</u>	<u>\$ (757,745)</u>	<u>\$ 9,733,062</u>
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Net Healthy Families Reimbursement - FFP

57. Healthy Families Net Reimbursement	(MH1979, Ln 24,24A)	\$ 0	\$ 617	\$ 617
58. Negotiated Rate Exceed Costs	(MH1979, Ln 26)	0	0	0
59. Administrative Reimbursement	(MH1979, Ln 10)	0	58	58
60. Total Healthy Families Reimbursement - FFP		<u>\$ 0</u>	<u>\$ 675</u>	<u>\$ 675</u>

61. Total - FFP (Ln 56 + Ln 60)		<u>\$ 10,490,807</u>	<u>\$ (757,070)</u>	<u>\$ 9,733,737</u>
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(To Sch. 1)

VENTURA
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2003

Legal Entity Number	Legal Entity	(1) Regular M/Cal and EPSDT Gross Reimb.	(2) EPSDT Enhanced - Children Gross Reimb.			(3) Enhanced - Refugees Gross Reimb.			(4) Total Gross Reimb. (Excl. HFP)	(5) Healthy Families Gross Reimb.	(6) Regular M/Cal and EPSDT Gross Reimb.	(7) EPSDT Enhanced - Children Gross Reimb.			(8) Enhanced - Refugees Gross Reimb.			(9) Total Gross Reimb. (Excl. HFP)	(10) Healthy Families Gross Reimb.							
		(MH 1968, Ln 11,11A)	I	N	P	A	T	I	E	N	T	(MH 1968, Ln 11,11A)	O	U	T	P	A	T	I	E	N	T	(MH 1968, Ln 11,11A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 6 to 8)
00108	Telecare Corporation	\$ 0	\$			\$			\$		\$	2,219,327	\$				\$		\$			\$	2,219,327	\$		0
00226	Turning Point Foundation	\$ 0	\$			\$			\$		\$	620,573	\$				\$		\$			\$	620,573	\$		0
00275	Casa Pacifica	\$ 0	\$			\$			\$		\$	1,440,650	\$				\$		\$			\$	1,440,650	\$		0
00295	Desert Counseling Clinic	\$ 0	\$			\$			\$		\$	0	\$				\$		\$			\$	0	\$		0
00409	Anne Sippl Clinic	\$ 0	\$			\$			\$		\$	84,149	\$				\$		\$			\$	84,149	\$		0
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**VENTURA
COMMUNITY MENTAL HEALTH SERVICES
COMPUTATION OF EPSDT STATE SHARE PER AUDIT
FISCAL YEAR ENDED JUNE 30, 2003**

	<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
(1) SD/MC Actuals (MH 1979, Lns. 16, 16A, 17, 17A, 18) (including contractors)	18,205,441	(330,657)	17,874,784
(2) Total SD/MC Claims	20,334,314	0	20,334,314
(3) Percent % (Line 1/Line 2)	0.8953	(0.0163)	0.8790
(4) EPSDT Claims	8,674,584	0	8,674,584
(5) Actual Cost Settled EPSDT SD/MC (Line 3 X Line 4)	7,766,355	(141,002)	7,625,353
(6) Cost Settled Baseline for EPSDT	3,843,078	0	3,843,078
(7) Net Cost Settlement Amount (Line 5 - Line 6)	3,923,277	(141,002)	3,782,275
(8) 48.56% of Net Cost Settlement Amount (Line 7 x 48.56%)	1,905,143	(68,470)	1,836,673
(8a) FY 2001-02 EPSDT settlement (48.64% of net cost (8))	1,490,175	0	1,490,175
(8b) Annual Local Growth (8) - (8a) = 8(b)	414,968	(68,470)	346,498
(9) County Match 10% of Local Growth (8b) x 10% = (9)	41,497	(6,847)	34,650
(10) Net Cost settlement amount (8) - (9) = (10)	1,863,646	(61,623)	1,802,023
(11) SGF Distribution Settled and Audited	1,863,646	0	1,863,646
(12) SGF Due (State)	<u>0</u>	<u>(61,623)</u>	<u>(61,623)</u>
			(To Sch. 1)

Source:

- (1) Total CFRS SD/MC actuals after final Settlement (Col. 1) and Audit (Col. 3) for Net Direct Outpatient Services (includes Mode 05 - SF's 20-94, Mode 10, and Mode 15)
- (2) Total SD/MC paid claims (total non-hospital, including PHF's) by County Submitting Claims (includes contract providers, excludes Healthy Families)
- (4) SD/MC paid claims for children under 21 years of age (full scope, non-hospital, including PHF's) including new aid codes by County of Beneficiary
- (6) Cost Settled Baseline for EPSDT for FY 2002-2003, includes increase for FFS/MC provider rate increase
- (7) Settlement amount prior to 10% match calculation (8) - (9)
- (11) SGF gross distribution (See DMH letter dated May 20, 2005 sent to Local Mental Health Directors) Includes adjustment for additional SGF and ASO non participants
- (12) Amount owed back to the state cannot be more than was advanced or settled.

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED COSTS - COUNTY PROVIDERS</u>			
1	MH 1960	8	C	ALLOWABLE COSTS FOR ALLOCATION To adjusted reported inpatient cost for Ventura County Medical Center to agree with State Department of Health Services' audit report. HCFA PUB. 15-1 SEC. 2304	\$ 42,641,961	\$ 2,621,018	\$ 45,262,979 *
2	MH 1960	8	C	ALLOWABLE COSTS FOR ALLOCATION To adjust reported outpatient managed care costs to agree with County's records. HCFA PUB. 15-1 SEC. 2304	** \$ 45,262,979	\$ (14,868)	\$ 45,248,111 *
3	MH 1960	8	C	ALLOWABLE COSTS FOR ALLOCATION To eliminate outpatient managed care costs for organizational providers. Organizational providers are required to prepare their own cost reports for reimbursement. CCR, Title 9, Chapter 11, Subchapter 4, Article 1, Section 1840.105, Paragraph 2	** \$ 45,248,111	\$ (13,850)	\$ 45,234,261
4	MH 1960	9	C	SD/MC ADMINISTRATION	\$ 2,449,703	\$ (762,319)	\$ 1,687,384
5	MH 1960	10	C	HEALTHY FAMILIES ADMINISTRATION	0	89	89
6	MH 1960	11	C	NON SD/MC ADMINISTRATION	1,064,296	762,230	1,826,526
Info.	MH 1960	12	C	TOTAL ADMINISTRATIVE COSTS	\$ <u>3,513,999</u>	\$ <u>0</u>	\$ <u>3,513,999</u>
				To reallocate total administrative costs to Medi-Cal and non-Medi-Cal based on unique client count. Administrative cost for Medi-Cal was further allocated to between Medi-Cal and Healthy Families based on audited gross cost.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED COSTS - COUNTY PROVIDERS</u>			
7	MH 1960	13	C	SKILLED PROFESSIONAL MEDICAL PERSONNEL	\$ 543,591	\$ (148,182)	\$ 395,409
8	MH 1960	14	C	OTHER SD/MC UTILIZATION REVIEW	339,132	(127)	339,005
9	MH 1960	15	C	NON-SD/MC UTILIZATION REVIEW	383,507	148,309	531,816
Info.	MH 1960	16	C	TOTAL UTILIZATION REVIEW COSTS	\$ <u>1,266,230</u>	\$ <u>0</u>	\$ <u>1,266,230</u>
				To reallocate total utilization review costs based on audited Medi-Cal units to audited total units.			
10	MH1960	18	C	MODE COSTS (DIRECT SERVICES AND MAA)	\$ 37,861,732	\$ 2,592,300	\$ 40,454,032
				To adjust Mode Costs in conjunction with adjustment number 1 through 3.			
				<u>ADJUSTMENTS TO ALLOCATION OF COSTS TO MODES OF SERVICE</u>			
11	MH 1964	2	A	HOSPITAL INPATIENT SERVICE (MODE 5-SFC 10-19)	\$ 9,689,308	\$ 2,621,018	\$ 12,310,326
Info.	MH 1964	3	A	OTHER 24 HOUR SERVICES (MODE 05-ALL OTHER SFC)	44,896	0	44,896
Info.	MH 1964	4	A	DAY SERVICES (MODE 10)	313,239	0	313,239
12	MH 1964	5	A	OUTPATIENT SERVICES (MODE 15)	26,165,456	(28,718)	26,136,738
Info.	MH 1964	6	A	OUTREACH SERVICE (MODE 45)	982,522	0	982,522
Info.	MH 1964	8	A	SUPPORT SERVICES (MODE 60)	666,311	0	666,311
Info.	MH 1964	9	A	TOTAL	\$ <u>37,861,732</u>	\$ <u>2,592,300</u>	\$ <u>40,454,032</u>
				To distribute audited Direct Services cost to Inpatient Services, Other 24 Hour Services, Day Services, Outpatient Services, Outreach Services and Support Services to reflect adjustment numbers 1 through 3.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO ALLOCATION OF COSTS TO MODES OF SERVICE</u>			
				<u>MODE-SF</u>			
13	MH 1966	3	B	MANAGED CARE MFCC 15-10	\$ 29,470	\$ 630	\$ 30,100
14	MH 1966	3	C	MANAGED CARE MFCC 15-40	170,890	5,670	176,560
Info.	MH 1966	3	D	MANAGED CARE PSYCHIATRISTS 15-11	180	0	180
15	MH 1966	3	E	MANAGED CARE PSYCHIATRISTS 15-31	36,664	1,800	38,464
16	MH 1966	3	F	MANAGED CARE PSYCHIATRISTS 15-41	10,560	601	11,161
17	MH 1966	3	G	MANAGED CARE PSYCHIATRISTS 15-61	109,432	15	109,447
18	MH 1966	3	H	MANAGED CARE PSYCHIATRISTS 15-69	142,929	(30,364)	112,565
19	MH 1966	3	I	MANAGED CARE PSYCHOLOGISTS 15-12	6,080	160	6,240
20	MH 1966	3	J	MANAGED CARE PSYCHOLOGISTS 15-32	36,754	285	37,039
21	MH 1966	3	K	MANAGED CARE PSYCHOLOGISTS 15-42	64,989	2,750	67,739
Info.	MH 1966	3	L	MANAGED CARE ORGANIZATIONAL 15-13	1,400	0	1,400 *
22	MH 1966	3	M	MANAGED CARE ORGANIZATIONAL 15-43	11,450	250	11,700 *
23	MH 1966	3	N	MANAGED CARE ORGANIZATIONAL 15-53	350	400	750 *
24	MH 1966	3	O	MANAGED CARE LCSW 15-14	8,923	280	9,203
25	MH 1966	3	P	MANAGED CARE LCSW 15-34	82,260	450	82,710
26	MH 1966	3	Q	MANAGED CARE LCSW 15-44	66,424	2,205	68,629
Info.	MH 1966	3	R	MANAGED CARE LCSW 15-50	945	0	945
Info.				TOTAL	\$ 779,700	\$ (14,868)	\$ 764,832
				To adjust Program 2 expenditures to agree with County's records.			
				HCFA PUB. 15-1 SEC. 2304			
27	MH 1966	3	L	MANAGED CARE ORGANIZATIONAL 15-13	** \$ 1,400	\$ (1,400)	\$ 0
28	MH 1966	3	M	MANAGED CARE ORGANIZATIONAL 15-43	** 11,700	(11,700)	0
29	MH 1966	3	N	MANAGED CARE ORGANIZATIONAL 15-53	** 750	(750)	0
Info.				TOTAL	\$ 13,850	(13,850)	0
				To eliminate cost of organizational providers. Organizational providers are required to prepared their own cost report for reimbursement.			
				CCR, Title 9, Chapter 11, Subchapter 4, Article 1, Section 1840.15, Paragraph 2			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO ALLOCATION OF COSTS TO MODES OF SERVICE			
				MODE-SF			
Info.	MH 1966	4	B	MANAGED CARE MFCC 15-10	\$ 1.17	\$ 0.00	\$ 1.17
Info.	MH 1966	4	C	MANAGED CARE MFCC 15-40	1.27	0.00	1.27
Info.	MH 1966	4	D	MANAGED CARE PSYCHIATRISTS 15-11	1.50	0.00	1.50
Info.	MH 1966	4	E	MANAGED CARE PSYCHIATRISTS 15-31	1.66	0.00	1.66
Info.	MH 1966	4	F	MANAGED CARE PSYCHIATRISTS 15-41	1.63	0.00	1.63
30	MH 1966	4	G	MANAGED CARE PSYCHIATRISTS 15-61	3.67	(0.01)	3.66
31	MH 1966	4	H	MANAGED CARE PSYCHIATRISTS 15-69	4.46	(1.59)	2.87
Info.	MH 1966	4	I	MANAGED CARE PSYCHOLOGISTS 15-12	1.33	0.00	1.33
Info.	MH 1966	4	J	MANAGED CARE PSYCHOLOGISTS 15-32	1.56	0.00	1.56
Info.	MH 1966	4	K	MANAGED CARE PSYCHOLOGISTS 15-42	1.45	0.00	1.45
Info.	MH 1966	4	L	MANAGED CARE ORGANIZATIONAL 15-13	0.83	0.00	0.83 *
Info.	MH 1966	4	M	MANAGED CARE ORGANIZATIONAL 15-43	0.91	0.00	0.91 *
Info.	MH 1966	4	N	MANAGED CARE ORGANIZATIONAL 15-53	1.25	0.00	1.25 *
Info.	MH 1966	4	O	MANAGED CARE LCSW 15-14	1.16	0.00	1.16
Info.	MH 1966	4	P	MANAGED CARE LCSW 15-34	1.51	0.00	1.51
Info.	MH 1966	4	Q	MANAGED CARE LCSW 15-44	1.27	0.00	1.27
Info.	MH 1966	4	R	MANAGED CARE LCSW 15-50	1.40	0.00	1.40
				To adjust Program 2 cost per unit in conjunction with adjustment number 2 to agree with County's records.			
				HCFA PUB. 15-1 SEC. 2304			
32	MH 1966	4	L	MANAGED CARE ORGANIZATIONAL 15-13	** \$ 0.83	\$ (0.83)	\$ 0.00
33	MH 1966	4	M	MANAGED CARE ORGANIZATIONAL 15-43	** 0.91	(0.91)	0.00
34	MH 1966	4	N	MANAGED CARE ORGANIZATIONAL 15-53	** 1.25	(1.25)	0.00
				To adjust Program 2 cost per unit in conjunction with adjustment number 3 and adjustment number 27 through 29.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED UNITS - COUNTY PROVIDERS</u>			
35	MH 1966	2	B	TOTAL UNITS - MODE 15-10 MANAGED CARE MFCC	25,260	540	25,800
36	MH 1966	2	C	TOTAL UNITS - MODE 15-40 MANAGED CARE MFCC	134,365	4,455	138,820
Info.	MH 1966	2	D	TOTAL UNITS - MODE 15-11 MANAGED CARE PSYCHIATRISTS	120	0	120
37	MH 1966	2	E	TOTAL UNITS - MODE 15-31 MANAGED CARE PSYCHIATRISTS	22,080	1,080	23,160
38	MH 1966	2	F	TOTAL UNITS - MODE 15-41 MANAGED CARE PSYCHIATRISTS	6,465	385	6,850
39	MH 1966	2	G	TOTAL UNITS - MODE 15-61 MANAGED CARE PSYCHIATRISTS	29,850	15	29,865
40	MH 1966	2	H	TOTAL UNITS - MODE 15-69 MANAGED CARE PSYCHIATRISTS	32,030	7,205	39,235
41	MH 1966	2	I	TOTAL UNITS - MODE 15-12 MANAGED CARE PSYCHOLOGISTS	4,560	120	4,680
42	MH 1966	2	J	TOTAL UNITS - MODE 15-32 MANAGED CARE PSYCHOLOGISTS	23,520	180	23,700
43	MH 1966	2	K	TOTAL UNITS - MODE 15-42 MANAGED CARE PSYCHOLOGISTS	44,715	1,925	46,640
Info.	MH 1966	2	L	TOTAL UNITS - MODE 15-13 MANAGED CARE ORGANIZATIONAL	1,680	0	1,680 *
44	MH 1966	2	M	TOTAL UNITS - MODE 15-43 MANAGED CARE ORGANIZATIONAL	12,595	275	12,870 *
45	MH 1966	2	N	TOTAL UNITS - MODE 15-53 MANAGED CARE ORGANIZATIONAL	280	320	600 *
46	MH 1966	2	O	TOTAL UNITS - MODE 15-14 MANAGED CARE LCSW	7,680	240	7,920
47	MH 1966	2	P	TOTAL UNITS - MODE 15-34 MANAGED CARE LCSW	54,600	300	54,900
48	MH 1966	2	Q	TOTAL UNITS - MODE 15-44 MANAGED CARE LCSW	52,250	1,870	54,120
Info.	MH 1966	2	R	TOTAL UNITS - MODE 15-50 MANAGED CARE LCSW	675	0	675
Info.				TOTAL	<u>452,725</u>	<u>18,910</u>	<u>471,635</u>
				To adjust Program 2 total units to agree with County's records.			
				HCFA PUB. 15-1 SEC. 2304			
49	MH 1966	2	L	TOTAL UNITS - MODE 15-13 MANAGED CARE ORGANIZATIONAL	1,680	(1,680)	0
50	MH 1966	2	M	TOTAL UNITS - MODE 15-43 MANAGED CARE ORGANIZATIONAL	12,870	(12,870)	0
51	MH 1966	2	N	TOTAL UNITS - MODE 15-53 MANAGED CARE ORGANIZATIONAL	600	(600)	0
				To adjust Program 2 total units in conjunction with adjustment number 3 and adjustment number 27 through 29.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED UNITS - COUNTY PROVIDERS</u>			
52	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 05-13	3,034	1,010	4,044 *
Info.	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 05-19	1,695	0	1,695
Info.	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 10-95	1,187	0	1,187
Info.	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-01	2,979,194	0	2,979,194
Info.	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 15-10	551,665	0	551,665
53	MH 1966	8,8A	D	MEDI-CAL UNITS - MODE 15-30	382,455	670	383,125
54	MH 1966	8,8A	E	MEDI-CAL UNITS - MODE 15-40	1,295,419	315	1,295,734
55	MH 1966	8,8A	F	MEDI-CAL UNITS - MODE 15-50	77,834	0	77,834
56	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-60	568,212	7,001	575,213
57	MH 1966	8,8A	H	MEDI-CAL UNITS - MODE 15-70	445,299	690	445,989
Info.	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-10 MANAGED CARE MFCC	25,260	0	25,260
Info.	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 15-40 MANAGED CARE MFCC	134,365	0	134,365
Info.	MH 1966	8,8A	D	MEDI-CAL UNITS - MODE 15-11 MANAGED CARE PSYCHIATRISTS	120	0	120
Info.	MH 1966	8,8A	E	MEDI-CAL UNITS - MODE 15-31 MANAGED CARE PSYCHIATRISTS	22,080	0	22,080
Info.	MH 1966	8,8A	F	MEDI-CAL UNITS - MODE 15-41 MANAGED CARE PSYCHIATRISTS	6,465	0	6,465
Info.	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-61 MANAGED CARE PSYCHIATRISTS	29,850	0	29,850
Info.	MH 1966	8,8A	H	MEDI-CAL UNITS - MODE 15-69 MANAGED CARE PSYCHIATRISTS	32,030	0	32,030
Info.	MH 1966	8,8A	I	MEDI-CAL UNITS - MODE 15-12 MANAGED CARE PSYCHOLOGISTS	4,560	0	4,560
Info.	MH 1966	8,8A	J	MEDI-CAL UNITS - MODE 15-32 MANAGED CARE PSYCHOLOGISTS	23,520	0	23,520
Info.	MH 1966	8,8A	K	MEDI-CAL UNITS - MODE 15-42 MANAGED CARE PSYCHOLOGISTS	44,715	0	44,715
Info.	MH 1966	8,8A	L	MEDI-CAL UNITS - MODE 15-13 MANAGED CARE ORGANIZATIONAL	1,680	0	1,680
Info.	MH 1966	8,8A	M	MEDI-CAL UNITS - MODE 15-43 MANAGED CARE ORGANIZATIONAL	12,595	0	12,595
Info.	MH 1966	8,8A	N	MEDI-CAL UNITS - MODE 15-53 MANAGED CARE ORGANIZATIONAL	280	0	280
Info.	MH 1966	8,8A	O	MEDI-CAL UNITS - MODE 15-14 MANAGED CARE LCSW	7,680	0	7,680
Info.	MH 1966	8,8A	P	MEDI-CAL UNITS - MODE 15-34 MANAGED CARE LCSW	54,600	0	54,600
Info.	MH 1966	8,8A	Q	MEDI-CAL UNITS - MODE 15-44 MANAGED CARE LCSW	52,250	0	52,250
Info.	MH 1966	8,8A	R	MEDI-CAL UNITS - MODE 15-50 MANAGED CARE LCSW	675	0	675
Info.				TOTAL	<u>6,758,719</u>	<u>9,686</u>	<u>6,768,405</u>
				To adjust reported Medi-Cal units to include Medicare/Medi-Cal Crossover units per settled cost report. The auditor submitted detail workpapers to the County.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED UNITS - COUNTY PROVIDERS</u>			
58	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 05-13	** 4,044	(56)	3,988 *
59	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 05-19	** 1,695	(67)	1,628 *
60	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 10-95	** 1,187	(221)	966 *
61	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-01	** 2,979,194	48,948	3,028,142 *
62	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 15-10	** 551,665	(8,978)	542,687 *
63	MH 1966	8,8A	D	MEDI-CAL UNITS - MODE 15-30	** 383,125	(9,723)	373,402 *
64	MH 1966	8,8A	E	MEDI-CAL UNITS - MODE 15-40	** 1,295,734	(5,647)	1,290,087 *
65	MH 1966	8,8A	F	MEDI-CAL UNITS - MODE 15-50	** 77,834	(880)	76,954 *
66	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-60	** 575,213	7,048	582,261 *
67	MH 1966	8,8A	H	MEDI-CAL UNITS - MODE 15-70	** 445,989	(45,790)	400,199 *
68	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-10 MANAGED CARE MFCC	** 25,260	120	25,380 *
69	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 15-40 MANAGED CARE MFCC	** 134,365	(10,450)	123,915 *
70	MH 1966	8,8A	D	MEDI-CAL UNITS - MODE 15-11 MANAGED CARE PSYCHIATRISTS	** 120	(120)	0 *
71	MH 1966	8,8A	E	MEDI-CAL UNITS - MODE 15-31 MANAGED CARE PSYCHIATRISTS	** 22,080	(360)	21,720 *
72	MH 1966	8,8A	F	MEDI-CAL UNITS - MODE 15-41 MANAGED CARE PSYCHIATRISTS	** 6,465	(1,295)	5,170 *
73	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-61 MANAGED CARE PSYCHIATRISTS	** 29,850	390	30,240 *
74	MH 1966	8,8A	H	MEDI-CAL UNITS - MODE 15-69 MANAGED CARE PSYCHIATRISTS	** 32,030	(1,295)	30,735 *
75	MH 1966	8,8A	I	MEDI-CAL UNITS - MODE 15-12 MANAGED CARE PSYCHOLOGISTS	** 4,560	(120)	4,440 *
76	MH 1966	8,8A	J	MEDI-CAL UNITS - MODE 15-32 MANAGED CARE PSYCHOLOGISTS	** 23,520	(4,860)	18,660 *
77	MH 1966	8,8A	K	MEDI-CAL UNITS - MODE 15-42 MANAGED CARE PSYCHOLOGISTS	** 44,715	(440)	44,275 *
78	MH 1966	8,8A	L	MEDI-CAL UNITS - MODE 15-13 MANAGED CARE ORGANIZATIONAL	** 1,680	(1,140)	540 *
79	MH 1966	8,8A	M	MEDI-CAL UNITS - MODE 15-43 MANAGED CARE ORGANIZATIONAL	** 12,595	(11,605)	990 *
80	MH 1966	8,8A	N	MEDI-CAL UNITS - MODE 15-53 MANAGED CARE ORGANIZATIONAL	** 280	160	440 *
81	MH 1966	8,8A	O	MEDI-CAL UNITS - MODE 15-14 MANAGED CARE LCSW	** 7,680	(300)	7,380 *
82	MH 1966	8,8A	P	MEDI-CAL UNITS - MODE 15-34 MANAGED CARE LCSW	** 54,600	(16,140)	38,460 *
83	MH 1966	8,8A	Q	MEDI-CAL UNITS - MODE 15-44 MANAGED CARE LCSW	** 52,250	(1,705)	50,545 *
84	MH 1966	8,8A	R	MEDI-CAL UNITS - MODE 15-50 MANAGED CARE LCSW	** 675	(100)	575 *
85	MH 1966	8,8A	-	MEDI-CAL UNITS - MODE 15-40 MANAGED CARE RN	0	3,465	3,465 *
Info.				TOTAL	<u>6,768,405</u>	<u>(64,626)</u>	<u>6,707,244</u>
				To adjust Medi-Cal units to agree with Department of Mental Health (DMH) Summary of Approved Claims. The auditor submitted detail workpapers to the County.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				ADJUSTMENTS TO REPORTED UNITS - COUNTY PROVIDERS			
Info.	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 05-13	** 3,988	0	3,988
Info.	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 05-19	** 1,628	0	1,628
Info.	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 10-95	** 966	0	966
Info.	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-01	** 3,028,142	0	3,028,142
Info.	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 15-10	** 542,687	0	542,687
Info.	MH 1966	8,8A	D	MEDI-CAL UNITS - MODE 15-30	** 373,402	0	373,402
Info.	MH 1966	8,8A	E	MEDI-CAL UNITS - MODE 15-40	** 1,290,087	0	1,290,087
Info.	MH 1966	8,8A	F	MEDI-CAL UNITS - MODE 15-50	** 76,954	0	76,954
Info.	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-60	** 582,261	0	582,261
Info.	MH 1966	8,8A	H	MEDI-CAL UNITS - MODE 15-70	** 400,199	0	400,199
86	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-10 MANAGED CARE MFCC	** 25,380	420	25,800
87	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 15-40 MANAGED CARE MFCC	** 123,915	14,905	138,820
88	MH 1966	8,8A	D	MEDI-CAL UNITS - MODE 15-11 MANAGED CARE PSYCHIATRISTS	** 0	120	120
89	MH 1966	8,8A	E	MEDI-CAL UNITS - MODE 15-31 MANAGED CARE PSYCHIATRISTS	** 21,720	1,440	23,160
90	MH 1966	8,8A	F	MEDI-CAL UNITS - MODE 15-41 MANAGED CARE PSYCHIATRISTS	** 5,170	1,680	6,850
91	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-61 MANAGED CARE PSYCHIATRISTS	** 30,240	(375)	29,865
92	MH 1966	8,8A	H	MEDI-CAL UNITS - MODE 15-69 MANAGED CARE PSYCHIATRISTS	** 30,735	8,500	39,235
93	MH 1966	8,8A	I	MEDI-CAL UNITS - MODE 15-12 MANAGED CARE PSYCHOLOGISTS	** 4,440	240	4,680
94	MH 1966	8,8A	J	MEDI-CAL UNITS - MODE 15-32 MANAGED CARE PSYCHOLOGISTS	** 18,660	5,040	23,700
95	MH 1966	8,8A	K	MEDI-CAL UNITS - MODE 15-42 MANAGED CARE PSYCHOLOGISTS	** 44,275	2,365	46,640
96	MH 1966	8,8A	L	MEDI-CAL UNITS - MODE 15-13 MANAGED CARE ORGANIZATIONAL	** 540	1,140	1,680
97	MH 1966	8,8A	M	MEDI-CAL UNITS - MODE 15-43 MANAGED CARE ORGANIZATIONAL	** 990	11,880	12,870
98	MH 1966	8,8A	N	MEDI-CAL UNITS - MODE 15-53 MANAGED CARE ORGANIZATIONAL	** 440	160	600
99	MH 1966	8,8A	O	MEDI-CAL UNITS - MODE 15-14 MANAGED CARE LCSW	** 7,380	540	7,920
100	MH 1966	8,8A	P	MEDI-CAL UNITS - MODE 15-34 MANAGED CARE LCSW	** 38,460	16,440	54,900
101	MH 1966	8,8A	Q	MEDI-CAL UNITS - MODE 15-44 MANAGED CARE LCSW	** 50,545	3,575	54,120
102	MH 1966	8,8A	R	MEDI-CAL UNITS - MODE 15-50 MANAGED CARE LCSW	** 575	100	675
103	MH 1966	8,8A	-	MEDI-CAL UNITS - MODE 15-40 MANAGED CARE RN	** 3,465	(3,465)	0
Info.				TOTAL	<u>6,707,244</u>	<u>68,170</u>	<u>6,771,949</u>
				To adjust Medi-Cal units to agree with County's records and supporting documents. The auditor submitted detail workpapers to the County.			
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED UNITS - COUNTY PROVIDERS</u>			
Info.	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 05-13	** 3,988	0	3,988 *
Info.	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 05-19	** 1,628	0	1,628
Info.	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 10-95	** 966	0	966
Info.	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-01	** 3,028,142	0	3,028,142 *
Info.	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 15-10	** 542,687	0	542,687 *
Info.	MH 1966	8,8A	D	MEDI-CAL UNITS - MODE 15-30	** 373,402	0	373,402 *
Info.	MH 1966	8,8A	E	MEDI-CAL UNITS - MODE 15-40	** 1,290,087	0	1,290,087 *
Info.	MH 1966	8,8A	F	MEDI-CAL UNITS - MODE 15-50	** 76,954	0	76,954 *
Info.	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-60	** 582,261	0	582,261 *
Info.	MH 1966	8,8A	H	MEDI-CAL UNITS - MODE 15-70	** 400,199	0	400,199 *
104	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-10 MANAGED CARE MFCC	** 25,800	(420)	25,380 *
105	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 15-40 MANAGED CARE MFCC	** 138,820	(14,905)	123,915
106	MH 1966	8,8A	D	MEDI-CAL UNITS - MODE 15-11 MANAGED CARE PSYCHIATRISTS	** 120	(120)	0
107	MH 1966	8,8A	E	MEDI-CAL UNITS - MODE 15-31 MANAGED CARE PSYCHIATRISTS	** 23,160	(1,440)	21,720
108	MH 1966	8,8A	F	MEDI-CAL UNITS - MODE 15-41 MANAGED CARE PSYCHIATRISTS	** 6,850	(1,680)	5,170
Info.	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-61 MANAGED CARE PSYCHIATRISTS	** 29,865	0	29,865 *
109	MH 1966	8,8A	H	MEDI-CAL UNITS - MODE 15-69 MANAGED CARE PSYCHIATRISTS	** 39,235	(8,500)	30,735
110	MH 1966	8,8A	I	MEDI-CAL UNITS - MODE 15-12 MANAGED CARE PSYCHOLOGISTS	** 4,680	(240)	4,440
111	MH 1966	8,8A	J	MEDI-CAL UNITS - MODE 15-32 MANAGED CARE PSYCHOLOGISTS	** 23,700	(5,040)	18,660
112	MH 1966	8,8A	K	MEDI-CAL UNITS - MODE 15-42 MANAGED CARE PSYCHOLOGISTS	** 46,640	(2,365)	44,275
113	MH 1966	8,8A	L	MEDI-CAL UNITS - MODE 15-13 MANAGED CARE ORGANIZATIONAL	** 1,680	(1,200)	480 *
114	MH 1966	8,8A	M	MEDI-CAL UNITS - MODE 15-43 MANAGED CARE ORGANIZATIONAL	** 12,870	(12,265)	605 *
115	MH 1966	8,8A	N	MEDI-CAL UNITS - MODE 15-53 MANAGED CARE ORGANIZATIONAL	** 600	(80)	520 *
116	MH 1966	8,8A	O	MEDI-CAL UNITS - MODE 15-14 MANAGED CARE LCSW	** 7,920	(540)	7,380
117	MH 1966	8,8A	P	MEDI-CAL UNITS - MODE 15-34 MANAGED CARE LCSW	** 54,900	(16,440)	38,460
118	MH 1966	8,8A	Q	MEDI-CAL UNITS - MODE 15-44 MANAGED CARE LCSW	** 54,120	(3,575)	50,545
119	MH 1966	8,8A	R	MEDI-CAL UNITS - MODE 15-50 MANAGED CARE LCSW	** 675	(100)	575
Info.	MH 1966	8,8A	-	MEDI-CAL UNITS - MODE 15-40 MANAGED CARE RN	** 0	0	0
Info.				TOTAL	<u>6,771,949</u>	<u>(68,910)</u>	<u>6,703,039</u>
				To adjust Medi-Cal units to the lower of DMH Summary of Approved Claims or the County's records. The auditor submitted detail workpapers to the County.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED UNITS - COUNTY PROVIDERS</u>			
120	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 05-13	3,988	(2)	3,986
121	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-01	3,028,142	(7,387)	3,020,755
122	MH 1966	8,8A	C	MEDI-CAL UNITS - MODE 15-10	542,687	(2,174)	540,513
123	MH 1966	8,8A	D	MEDI-CAL UNITS - MODE 15-30	373,402	(776)	372,626
124	MH 1966	8,8A	E	MEDI-CAL UNITS - MODE 15-40	1,290,087	(7,157)	1,282,930
125	MH 1966	8,8A	F	MEDI-CAL UNITS - MODE 15-50	76,954	(425)	76,529
126	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-60	582,261	(1,210)	581,051
127	MH 1966	8,8A	H	MEDI-CAL UNITS - MODE 15-70	400,199	(1,575)	398,624
128	MH 1966	8,8A	B	MEDI-CAL UNITS - MODE 15-10 MANAGED CARE MFCC	25,380	(120)	25,260
129	MH 1966	8,8A	G	MEDI-CAL UNITS - MODE 15-61 MANAGED CARE PSYCHIATRISTS	29,865	(15)	29,850
130	MH 1966	8,8A	L	MEDI-CAL UNITS - MODE 15-13 MANAGED CARE ORGANIZATIONAL	480	(480)	-
131	MH 1966	8,8A	M	MEDI-CAL UNITS - MODE 15-43 MANAGED CARE ORGANIZATIONAL	605	(605)	-
132	MH 1966	8,8A	N	MEDI-CAL UNITS - MODE 15-53 MANAGED CARE ORGANIZATIONAL	520	(520)	-
Info.				TOTAL	<u>6,354,570</u>	<u>(22,446)</u>	<u>6,332,124</u>
				To adjust Medi-Cal units to reflect adjustments identified by the County and State. The auditor submitted detail workpapers to the County.			
				- County's Backout Units	(20,706)		
				- Managed Care Organizational Provider without cost report.	(1,605)		
				- Medi-Cal Units greater than Audited Total Units	(135)		
					<u>(22,446)</u>		
				<u>ADJUSTMENTS TO REPORTED UNITS - CONTRACT PROVIDERS</u>			
133	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00108 TELECARE CORPORATION	609,771	6,403	616,174 *
134	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00226 TURNING POINT FOUNDATION	367,703	800	368,503 *
135	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00275 CASA PACIFICA	722,131	(26,042)	696,089 *
136	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00295 DESERT COUNSELING CLINIC	0	83,155	83,155 *
137	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00409 ANNE SIPPY CLINIC	34,491	(1,227)	33,264 *
Info.				TOTAL	<u>1,734,096</u>	<u>63,089</u>	<u>1,797,185</u>
				To adjust reported Medi-Cal units to agree with Department of Mental Health (DMH) Summary of Approved Claims. The auditor submitted detail workpapers to the County.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED UNITS - CONTRACT PROVIDERS</u>			
Info.	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00108 TELECARE CORPORATION **	616,174	0	616,174 *
Info.	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00226 TURNING POINT FOUNDATION **	368,503	0	368,503 *
Info.	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00275 CASA PACIFICA **	696,089	0	696,089 *
Info.	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00295 DESERT COUNSELING CLINIC **	83,155	0	83,155 *
Info.	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00409 ANNE SIPPI CLINIC **	33,264	0	33,264 *
				TOTAL	<u>1,797,185</u>	<u>0</u>	<u>1,797,185</u>
				To adjust Medi-Cal units to agree with County's records and supporting documents. The auditor submitted detail workpapers to the County.			
138	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00108 TELECARE CORPORATION **	616,174	(5,631)	610,543
139	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00226 TURNING POINT FOUNDATION **	368,503	(1,155)	367,348
140	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00275 CASA PACIFICA **	696,089	(6,982)	689,107
141	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00295 DESERT COUNSELING CLINIC **	83,155	(83,155)	0
Info.	MH 1966	8,8A	TOTAL	MEDI-CAL UNITS - ENTITY #00409 ANNE SIPPI CLINIC **	33,264	0	33,264
				TOTAL	<u>1,797,185</u>	<u>(96,923)</u>	<u>1,700,262</u>
				To adjust Medi-Cal units to reflect adjustments identified by the County and State. The auditor submitted detail workpapers to the County.			
				- County's Backout Units (14,013)			
				- State DMH Medi-Cal Oversight Disallowances (260)			
				- Provider without a cost report (82,650)			
					<u>(96,923)</u>		
				<u>ADJUSTMENTS TO REPORTED REVENUES - COUNTY PROVIDERS</u>			
142	MH 1968	28	E	SD/MC + CROSSOVER REVENUES - INPATIENT 07/02 - 09/30/02	\$ 163,984	\$ (8,258)	\$ 155,726 *
143	MH 1968	28A	E	SD/MC + CROSSOVER REVENUES - INPATIENT 10/02 - 06/30/03	599,856	(30,207)	569,649 *
Info.				TOTAL	<u>\$ 763,840</u>	<u>\$ (38,465)</u>	<u>\$ 725,375</u>
				To adjust reported crossover revenues to agree with County's records.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED REVENUES - COUNTY PROVIDERS</u>			
144	MH 1968	28	E	SD/MC + CROSSOVER REVENUES - INPATIENT 07/02 - 09/30/02	** \$ 155,726	\$ 59,451	\$ 215,177
145	MH 1968	28A	E	SD/MC + CROSSOVER REVENUES - INPATIENT 10/02 - 06/30/03	** 569,649	217,471	787,120
Info.				TOTAL	\$ 725,375	\$ 276,922	\$ 1,002,297
				To include the settlement of the Medicare cost report dated September 26, 2006.			
146	MH 1968	28	K	SD/MC + CROSSOVER REVENUES - OUTPATIENT 07/02 - 09/30/02	\$ 31,231	\$ (10,463)	\$ 20,768
147	MH 1968	28A	K	SD/MC + CROSSOVER REVENUES - OUTPATIENT 10/02 - 06/30/03	70,326	(23,562)	46,764
Info.				TOTAL	\$ 101,557	\$ (34,025)	\$ 67,532
				To adjust reported crossover revenues to agree with County's records.			
				<u>ADJUSTMENTS TO OTHER MATTERS - COUNTY OPERATED</u>			
148	MH 1991		G	PHYSICIAN COSTS - 07/01/02-07/30/02	\$ 5,482	\$ (253)	\$ 5,229
149	MH 1991		G	PHYSICIAN COSTS - 08/01/02-09/30/02	14,760	(422)	14,338
150	MH 1991		G	PHYSICIAN COSTS - 10/01/02-12/31/02	19,145	(1,349)	17,796
151	MH 1991		G	PHYSICIAN COSTS - 01/01/03-06/30/03	32,091	(801)	31,290
152	MH 1991		H	ANCILLARY COSTS - 07/01/02-07/30/02	6,270	(2,180)	4,090
153	MH 1991		H	ANCILLARY COSTS - 08/01/02-09/30/02	16,881	(5,666)	11,215
154	MH 1991		H	ANCILLARY COSTS - 10/01/02-12/31/02	21,896	(7,976)	13,920
155	MH 1991		H	ANCILLARY COSTS - 01/01/03-06/30/03	36,703	(12,228)	24,475
Info.				TOTAL	\$ 153,228	\$ (30,875)	\$ 122,353
				To adjust reported physician and ancillary costs to agree with audited amounts per County's records.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT				00056	160	June 30, 2003	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SETTLEMENT</u>			
156	MH 1979	2	C	CONTRACT PROVIDER MEDI-CAL DIRECT SERVICE GROSS REIMBURSEMENT	\$ 4,471,205	\$ (106,506)	\$ 4,364,699
				To adjust outpatient contract provider Medi-Cal Direct Service Gross Reimbursement as a result of adjustments to SD/MC units of service.			
				Entity #00108 Telecare Corporation \$ 2,219,327			
				Entity #00226 Turning Point Foundation 620,573			
				Entity #00275 Casa Pacifica 1,440,650			
				Entity #00295 Desert Counseling Clinic -			
				Entity #00409 Anne Sippi Clinic 84,149			
				\$ <u>4,364,699</u>			
157	MH 1979	23	J	TOTAL SD/MC REIMBURSEMENT FFP - COUNTY PROVIDERS	\$ 10,490,807	\$ (757,745)	\$ 9,733,062
158	MH 1979	27	J	TOTAL HEALTHY FAMILIES REIMBURSEMENT FFP - COUNTY PROVIDERS	0	675	675
Info.				TOTAL	\$ <u>10,490,807</u>	\$ <u>(757,070)</u>	\$ <u>9,733,737</u> *
				To adjust Total SD/MC Reimbursement to reflect the result of the adjustments made to costs, revenues and units of service.			
159	Sch. 1			TOTAL SD/MC REIMBURSEMENT - FFP **	\$ 9,733,737	\$ 2,248,558	\$ 11,982,295
				To adjust Total SD/MC Reimbursement for contract providers to reflect the result of adjustments to SD/MC units of service.			
				Per Final Settlement \$ 2,302,806			
				Adjustment (54,248)			
				Per Audit \$ <u>2,248,558</u>			
160	Sch. 4			EPSDT - SGF	\$ 1,863,646	\$ (61,623)	\$ 1,802,023
				To adjust the final settlement under EPSDT program to reflect the adjustments made to costs and units of service.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

CALCULATION OF PROGRAM COSTS

MH 1960 (10/04)

Fiscal Year 2002-2003

County: VENTURA

County Code: 56

Legal Entity: VENTURA COUNTY - B.H.D.		A	B	C
Legal Entity Number: 00056		Salaries and Benefits	Other	Total Costs
1	Mental Health Expenditures	28,157,285	24,760,724	52,918,009
2	Encumbrances			
3	Less: Payments to Contract Providers (County Only)		(7,622,254)	(7,622,254)
4	Other Adjustments (Provide Detail)		(2,972,479)	(2,972,479)
5	Total Costs Before Medi-Cal Adjustments	28,157,285	14,165,991	42,323,276
6	Medi-Cal Adjustments from MH 1961			2,910,985
7	Managed Care Consolidation (County Only)			
8	Allowable Costs for Allocation			45,234,261
	Administrative Costs (County Only)			
9	SD/MC Administration			1,687,384
10	Healthy Families Administration			89
11	Non-SD/MC Administration			1,826,526
12	Total Administrative Costs			3,513,999
	Utilization Review Costs (County Only)			
13	Skilled Professional Medical Personnel			395,409
14	Other SD/MC Utilization Review			339,005
15	Non-SD/MC Utilization Review			531,816
16	Total Utilization Review Costs			1,266,230
	Research and Evaluation (County Only)			
17	Mode Costs (Direct Service and MAA)			40,454,032
18	Total Costs - Lines 9 through 18			45,234,261

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

MEDI-CAL ADJUSTMENTS TO COSTS

MH 1961 (10/04)

Fiscal Year 2002-2003

County: VENTURA
County Code: 56

Legal Entity: VENTURA COUNTY - B.H.D.		A	B	C
Legal Entity Number: 00056		Salaries and Benefits	Other	Total Adjustments
1	DEPRECIATION		318,685	318,685
2				
3	ADJUSTMENTS PER STATE DMH AUDIT			
4	To adjust reported inpatient costs for Ventura County			
5	Medical Center to agree with State Department of			
6	Health Services' Audit.		2,621,018	2,621,018
7				
8	To adjust reported outpatient managed care costs to			
9	agree with County's records.		(14,868)	(14,868)
10				
11	To eliminate organizational provider costs reported			
12	as Outpatient Program 2 costs.		(13,850)	(13,850)
13				
14				
15				
16				
17				
18				
19				
20	Total Adjustments		2,910,985	2,910,985

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY
ALLOCATION OF COSTS TO MODES OF SERVICE
MH 1964 (10/04)

DEPARTMENT OF MENTAL HEALTH
Fiscal Year 2002-2003

County: VENTURA
County Code: 56

Legal Entity: VENTURA COUNTY - B.H.D.		A
Legal Entity Number: 00056		Total Costs
1	Mode Costs (Direct Service and MAA) from MH 1960	40,454,032
	Modes	
2	Hospital Inpatient Services (Mode 05-SFC 10-19)	12,310,326
3	Other 24 Hour Services (Mode 05-All Other SFC)	44,896
4	Day Services (Mode 10)	313,239
5	Outpatient Services (Mode 15 Program 1 + Program 2)	26,136,738
6	Outreach Services (Mode 45)	982,522
7	Medi-Cal Administrative Activities (Mode 55)	
8	Support Services (Mode 60)	666,311
9	Total - Lines 2 through 8	40,454,032

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966A (10/04)

DETAIL COST REPORT

PAGE 1 OF 1
Fiscal Year 2002-2003

County: VENTURA County Code: 56			CR		CR					
Legal Entity: VENTURA COUNTY - B.H.D.			A	B	C	D	E	F	G	
Legal Entity Number: 00056				Service	Service	Service	Service	Service	Service	
Mode: 05 - Hospital Inpatient (SFC 10-19)			Mode Total	Function	Function	Function	Function	Function	Function	
				13	19					
1	Allocation Percentage		100.00%	78.04%	21.96%					
2	Total Units			10,173	2,863					
3	Gross Cost		12,310,326	9,606,700	2,703,626					
4	Cost per Unit			944.33	944.33					
5	SMA per Unit			838.20	235.96					
6	Published Charge per Unit			884.00	884.00					
7	Negotiated Rate / Cost per Unit									
8	Medi-Cal Units	07/01/02 - 09/30/02		753	464					
8A		10/01/02 - 06/30/03		2,233	1,164					
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02		230						
9A		10/01/02 - 06/30/03		770						
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02								
10A		10/01/02 - 06/30/03								
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03								
11	Healthy Families (SED) Units	07/01/02 - 09/30/02								
11A		10/01/02 - 06/30/03								
12	Non-Medi-Cal Units			6,187	1,235					
13	Medi-Cal Costs	07/01/02 - 09/30/02	855,005	711,083	143,922	*				
13A		10/01/02 - 06/30/03	2,471,323	2,108,696	362,627	*				
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	775,087	631,165	143,922	*				
14A		10/01/02 - 06/30/03	2,234,328	1,871,701	362,627	*				
15	Medi-Cal Published Charges	07/01/02 - 09/30/02	809,574	665,652	143,922	*				
15A		10/01/02 - 06/30/03	2,336,599	1,973,972	362,627	*				
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02								
16A		10/01/02 - 06/30/03								
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02	217,197	217,197						
17A		10/01/02 - 06/30/03	727,136	727,136						
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02	192,786	192,786						
18A		10/01/02 - 06/30/03	645,414	645,414						
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02	203,320	203,320						
19A		10/01/02 - 06/30/03	680,680	680,680						
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02								
20A		10/01/02 - 06/30/03								
21	Enhanced SD/MC (Children) Costs	07/01/02 - 09/30/02								
21A		10/01/02 - 06/30/03								
22	Enhanced SD/MC (Children) SMA Upper Limits	07/01/02 - 09/30/02								
22A		10/01/02 - 06/30/03								
23	Enhanced SD/MC (Children) Published Charges	07/01/02 - 09/30/02								
23A		10/01/02 - 06/30/03								
24	Enhanced SD/MC (Children) Negotiated Rates	07/01/02 - 09/30/02								
24A		10/01/02 - 06/30/03								
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03								
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03								
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03								
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03								
29	Healthy Families Costs	07/01/02 - 09/30/02								
29A		10/01/02 - 06/30/03								
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02								
30A		10/01/02 - 06/30/03								
31	Healthy Families Published Charges	07/01/02 - 09/30/02								
31A		10/01/02 - 06/30/03								
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02								
32A		10/01/02 - 06/30/03								
33	Non-Medi-Cal Costs		8,039,665	5,842,589	2,197,076					

* SFC 19 Limited to SMA + Physician and Ancillary.

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CR

Legal Entity: VENTURA COUNTY - B.H.D.			A	B	C	D	E	F	G
Legal Entity Number: 00056				Service	Service	Service	Service	Service	Service
Mode: 05 - Other 24 Hour Services (All Other SFC)			Mode Total	Function	Function	Function	Function	Function	Function
				85					
1	Allocation Percentage		100.00%	100.00%					
2	Total Units			3,840					
3	Gross Cost		44,896	44,896					
4	Cost per Unit			11.69					
5	SMA per Unit								
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02							
8A		10/01/02 - 06/30/03							
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02							
9A		10/01/02 - 06/30/03							
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units			3,840					
13	Medi-Cal Costs	07/01/02 - 09/30/02							
13A		10/01/02 - 06/30/03							
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02							
14A		10/01/02 - 06/30/03							
15	Medi-Cal Published Charges	07/01/02 - 09/30/02							
15A		10/01/02 - 06/30/03							
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02							
17A		10/01/02 - 06/30/03							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02							
18A		10/01/02 - 06/30/03							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03							
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03							
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		44,896	44,896					

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

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Legal Entity: VENTURA COUNTY - B.H.D.			A	B	C	D	E	F	G
Legal Entity Number: 00056			Mode Total	Service	Service	Service	Service	Service	Service
Mode: 10 - Day Services				Function	Function	Function	Function	Function	Function
1	Allocation Percentage		100.00%	41	95				
2	Total Units			60.46%	39.54%				
3	Gross Cost		313,239	189,391	123,848				
4	Cost per Unit			14.89	33.55				
5	SMA per Unit				115.14				
6	Published Charge per Unit				115.26				
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02			352				
8A		10/01/02 - 06/30/03			614				
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02							
9A		10/01/02 - 06/30/03							
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02							
10A		10/01/02 - 06/30/03							
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units			12,720	2,725				
13	Medi-Cal Costs	07/01/02 - 09/30/02	11,811		11,811				
13A		10/01/02 - 06/30/03	20,602		20,602				
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	40,529		40,529				
14A		10/01/02 - 06/30/03	70,696		70,696				
15	Medi-Cal Published Charges	07/01/02 - 09/30/02	40,572		40,572				
15A		10/01/02 - 06/30/03	70,770		70,770				
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02							
17A		10/01/02 - 06/30/03							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02							
18A		10/01/02 - 06/30/03							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02							
21A		10/01/02 - 06/30/03							
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02							
22A		10/01/02 - 06/30/03							
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03							
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03							
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		280,826	189,391	91,435				

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

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DETAIL COST REPORT

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Fiscal Year 2002-2003County: VENTURA
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		CR	CR	CR	CR	CR	CR	CR
Legal Entity: VENTURA COUNTY - B.H.D.		A	B	C	D	E	F	G
Legal Entity Number: 00056		Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient (Program 1)			01	10	30	40	50	60
1	Allocation Percentage	100.00%	28.06%	10.50%	8.36%	19.73%	2.80%	17.70%
2	Total Units	4,480,878	1,301,767	1,035,845	2,444,997	347,031	1,182,495	1,085,122
3	Gross Cost	25,385,756	7,124,091	2,666,125	2,121,495	5,007,554	710,748	4,493,125
4	Cost per Unit		1.59	2.05	2.05	2.05	2.05	3.80
5	SMA per Unit		1.77	2.28	2.28	2.28	2.28	4.23
6	Published Charge per Unit		2.00	2.55	2.55	2.55	2.55	4.75
7	Negotiated Rate / Cost per Unit							
8	Medi-Cal Units	07/01/02 - 09/30/02	668,411	124,908	82,768	302,128	12,981	117,127
8A		10/01/02 - 06/30/03	2,350,258	413,138	282,112	976,549	63,513	424,351
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02			300			2,840
9A		10/01/02 - 06/30/03			3,557	325		33,742
10	Enhanced SD/MC (Children) Units	07/01/02 - 09/30/02	272	213		500		137
10A		10/01/02 - 06/30/03	1,737	2,238	3,889	3,428	35	2,797
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03						
11	Healthy Families (SED) Units	07/01/02 - 09/30/02						
11A		10/01/02 - 06/30/03	77	16				57
12	Non-Medi-Cal Units		1,459,923	761,254	663,219	1,162,067	270,502	601,444
13	Medi-Cal Costs	07/01/02 - 09/30/02	2,888,900	1,062,746	255,822	169,516	618,783	26,586
13A		10/01/02 - 06/30/03	9,810,106	3,736,812	846,140	577,788	2,000,052	130,080
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	3,216,033	1,183,087	284,790	188,711	688,652	29,597
14A		10/01/02 - 06/30/03	10,920,986	4,159,957	941,955	643,215	2,226,532	144,810
15	Medi-Cal Published Charges	07/01/02 - 09/30/02	3,611,346	1,336,822	318,515	211,058	770,426	33,102
15A		10/01/02 - 06/30/03	12,266,200	4,700,516	1,053,502	719,386	2,490,200	161,958
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02						
16A		10/01/02 - 06/30/03						
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02	12,294			614		10,791
17A		10/01/02 - 06/30/03	138,871			7,265	666	128,209
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02	13,686			684		12,013
18A		10/01/02 - 06/30/03	154,597			8,110	741	142,729
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02	15,357			765		13,490
19A		10/01/02 - 06/30/03	173,537			9,070	829	160,275
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02						
20A		10/01/02 - 06/30/03						
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02	2,413	432	436		1,024	521
21A		10/01/02 - 06/30/03	33,245	2,762	4,584	7,965	7,021	10,628
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02	2,687	481	486		1,140	580
22A		10/01/02 - 06/30/03	37,010	3,074	5,103	8,867	7,816	11,831
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02	3,013	544	543		1,275	651
23A		10/01/02 - 06/30/03	41,480	3,474	5,707	9,917	8,741	13,286
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02						
24A		10/01/02 - 06/30/03						
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03						
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03						
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03						
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03						
29	Healthy Families Costs	07/01/02 - 09/30/02						
29A		10/01/02 - 06/30/03	372	122	33			217
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02						
30A		10/01/02 - 06/30/03	414	136	36			241
31	Healthy Families Published Charges	07/01/02 - 09/30/02						
31A		10/01/02 - 06/30/03	466	154	41			271
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02						
32A		10/01/02 - 06/30/03						
33	Non-Medi-Cal Costs		12,499,555	2,321,217	1,559,110	1,358,327	2,380,008	554,010

2,285,306 2,041,577

County: VENTURA County Code: 56			MHS	MHS	MHS	MHS	MHS	MHS	
Legal Entity: VENTURA COUNTY - B.H.D.			A	B	C	D	E	F	G
Legal Entity Number: 00056			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient (Program 2)				10	40	11	31	41	61
1	Allocation Percentage		100.00%	4.01%	23.51%	0.02%	5.12%	1.49%	14.57%
2	Total Units			25,800	138,820	120	23,160	6,850	29,865
3	Gross Cost		750,982	30,100	176,560	180	38,464	11,161	109,447
4	Cost per Unit			1.17	1.27	1.50	1.66	1.63	3.66
5	SMA per Unit			2.28	2.28	2.28	2.28	2.28	4.23
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8									
8A	Medi-Cal Units	07/01/02 - 09/30/02		5,910	25,520		6,960	1,980	7,616
		10/01/02 - 06/30/03		17,610	94,930		14,520	3,190	22,204
9	Medicare/Medi-Cal Crossover Units		07/01/02 - 09/30/02		275				
9A		10/01/02 - 06/30/03			110				
10	Enhanced SD/MC Units		07/01/02 - 09/30/02	180	220	120			15
10A		10/01/02 - 06/30/03		1,320	2,695	120			15
10B	Enhanced SD/MC (Refugees) Units		07/01/02 - 06/30/03						
11	Healthy Families (SED) Units		07/01/02 - 09/30/02	240	165				
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units			540	14,905	120	1,440	1,680	15
13									
13A	Medi-Cal Costs	07/01/02 - 09/30/02	145,544	6,895	32,458		11,559	3,226	27,911
		10/01/02 - 06/30/03	504,546	20,545	120,738		24,115	5,198	81,372
14	Medi-Cal SMA Upper Limits		07/01/02 - 09/30/02	226,276	13,475	58,186	15,869	4,514	32,216
14A		10/01/02 - 06/30/03	788,918	40,151	216,440		33,106	7,273	93,923
15	Medi-Cal Published Charges		07/01/02 - 09/30/02						
15A		10/01/02 - 06/30/03							
16	Medi-Cal Negotiated Rates		07/01/02 - 09/30/02						
16A		10/01/02 - 06/30/03							
17									
17A	Medicare/Medi-Cal Crossover Costs		07/01/02 - 09/30/02	385	350				
		10/01/02 - 06/30/03	265		140				
18	Medicare/Medi-Cal Crossover SMA Upper Limits		07/01/02 - 09/30/02	684	627				
18A		10/01/02 - 06/30/03	445		251				
19	Medicare/Medi-Cal Crossover Published Charges		07/01/02 - 09/30/02						
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates		07/01/02 - 09/30/02						
20A		10/01/02 - 06/30/03							
21									
21A	Enhanced SD/MC Costs	07/01/02 - 09/30/02	1,485	210	280		199		55
		10/01/02 - 06/30/03	7,150	1,540	3,428		199		55
22	Enhanced SD/MC SMA Upper Limits		07/01/02 - 09/30/02	2,378	410	502	274		63
22A		10/01/02 - 06/30/03	12,626	3,010	6,145		274		63
23	Enhanced SD/MC Published Charges		07/01/02 - 09/30/02						
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates		07/01/02 - 09/30/02						
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs		07/01/02 - 06/30/03						
26	Enhanced SD/MC (Refugees) SMA Upper Limits		07/01/02 - 06/30/03						
27	Enhanced SD/MC (Refugees) Published Charges		07/01/02 - 06/30/03						
28	Enhanced SD/MC (Refugees) Negotiated Rates		07/01/02 - 06/30/03						
29									
29A	Healthy Families Costs	07/01/02 - 09/30/02	490	280	210				
		10/01/02 - 06/30/03	80						
30	Healthy Families SMA Upper Limits		07/01/02 - 09/30/02	923	547	376			
30A		10/01/02 - 06/30/03	137						
31	Healthy Families Published Charges		07/01/02 - 09/30/02						
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates		07/01/02 - 09/30/02						
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		2,338,436	1,169,218	584,609	292,305	146,152	2,737	55

County: VENTURA County Code: 56			MHS	MHS	MHS	MHS	MHS	MHS	MHS
Legal Entity: VENTURA COUNTY - B.H.D.			H	I	J	K	L	M	N
Legal Entity Number: 00056			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient (Program 2)			69	12	32	42	13	43	53
1	Allocation Percentage		14.99%	0.83%	4.93%	9.02%			
2	Total Units		39,235	4,680	23,700	46,640			
3	Gross Cost		112,565	6,240	37,039	67,739			
4	Cost per Unit		2.87	1.33	1.56	1.45			
5	SMA per Unit		4.23	2.28	2.28	2.28	2.28	2.28	2.28
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02	3,460	1,440	4,620	7,645			
8A		10/01/02 - 06/30/03	27,275	2,940	13,440	36,575			
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02							
9A		10/01/02 - 06/30/03							
10	Enhanced SD/MC Units	07/01/02 - 09/30/02			240	55			
10A		10/01/02 - 06/30/03			360				
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03		60					
12	Non-Medi-Cal Units		8,500	240	5,040	2,365			
13	Medi-Cal Costs	07/01/02 - 09/30/02	9,927	1,920	7,220	11,103			
13A		10/01/02 - 06/30/03	78,252	3,920	21,004	53,121			
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	14,636	3,283	10,534	17,431			
14A		10/01/02 - 06/30/03	115,373	6,703	30,643	83,391			
15	Medi-Cal Published Charges	07/01/02 - 09/30/02							
15A		10/01/02 - 06/30/03							
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02							
17A		10/01/02 - 06/30/03							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02							
18A		10/01/02 - 06/30/03							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02			375	80			
21A		10/01/02 - 06/30/03			563				
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02			547	125			
22A		10/01/02 - 06/30/03			821				
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03		80					
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03		137					
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		71,680	35,840	17,920	8,960	4,480	2,240	1,120

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966A (10/04)

DETAIL COST REPORT

PAGE 3 OF 3
Fiscal Year 2002-2003

County: VENTURA County Code: 56			MHS	MHS	MHS	MHS			
Legal Entity: VENTURA COUNTY - B.H.D.			O	P	Q	R	S	T	U
Legal Entity Number: 00056			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient (Program 2)			14	34	44	50			
1	Allocation Percentage		1.23%	11.01%	9.14%	0.13%			
2	Total Units		7,920	54,900	54,120	675			
3	Gross Cost		9,203	82,710	68,629	945			
4	Cost per Unit		1.16	1.51	1.27	1.40			
5	SMA per Unit		2.28	2.28	2.28	2.28			
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/02 - 09/30/02	1,260	9,180	13,805	375			
8A		10/01/02 - 06/30/03	5,880	28,680	36,355	100			
9	Medicare/Medi-Cal Crossover Units	07/01/02 - 09/30/02				25			
9A		10/01/02 - 06/30/03		60		25			
10	Enhanced SD/MC Units	07/01/02 - 09/30/02		120	55	25			
10A		10/01/02 - 06/30/03	240	420	330	25			
10B	Enhanced SD/MC (Refugees) Units	07/01/02 - 06/30/03							
11	Healthy Families (SED) Units	07/01/02 - 09/30/02							
11A		10/01/02 - 06/30/03							
12	Non-Medi-Cal Units		540	16,440	3,575	100			
13	Medi-Cal Costs	07/01/02 - 09/30/02	1,464	13,830	17,506	525			
13A		10/01/02 - 06/30/03	6,833	43,208	46,101	140			
14	Medi-Cal SMA Upper Limits	07/01/02 - 09/30/02	2,873	20,930	31,475	855			
14A		10/01/02 - 06/30/03	13,406	65,390	82,889	228			
15	Medi-Cal Published Charges	07/01/02 - 09/30/02							
15A		10/01/02 - 06/30/03							
16	Medi-Cal Negotiated Rates	07/01/02 - 09/30/02							
16A		10/01/02 - 06/30/03							
17	Medicare/Medi-Cal Crossover Costs	07/01/02 - 09/30/02				35			
17A		10/01/02 - 06/30/03		90		35			
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/02 - 09/30/02				57			
18A		10/01/02 - 06/30/03		137		57			
19	Medicare/Medi-Cal Crossover Published Charges	07/01/02 - 09/30/02							
19A		10/01/02 - 06/30/03							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/02 - 09/30/02							
20A		10/01/02 - 06/30/03							
21	Enhanced SD/MC Costs	07/01/02 - 09/30/02		181	70	35			
21A		10/01/02 - 06/30/03	279	633	418	35			
22	Enhanced SD/MC SMA Upper Limits	07/01/02 - 09/30/02		274	125	57			
22A		10/01/02 - 06/30/03	547	958	752	57			
23	Enhanced SD/MC Published Charges	07/01/02 - 09/30/02							
23A		10/01/02 - 06/30/03							
24	Enhanced SD/MC Negotiated Rates	07/01/02 - 09/30/02							
24A		10/01/02 - 06/30/03							
25	Enhanced SD/MC (Refugees) Costs	07/01/02 - 06/30/03							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/02 - 06/30/03							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/02 - 06/30/03							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/02 - 06/30/03							
29	Healthy Families Costs	07/01/02 - 09/30/02							
29A		10/01/02 - 06/30/03							
30	Healthy Families SMA Upper Limits	07/01/02 - 09/30/02							
30A		10/01/02 - 06/30/03							
31	Healthy Families Published Charges	07/01/02 - 09/30/02							
31A		10/01/02 - 06/30/03							
32	Healthy Families Negotiated Rates	07/01/02 - 09/30/02							
32A		10/01/02 - 06/30/03							
33	Non-Medi-Cal Costs		560	280	140	140			

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966A (10/04)

DETAIL COST REPORT

PAGE 1 OF 1
Fiscal Year 2002-2003

County: VENTURA
County Code: 56

CR

Legal Entity: VENTURA COUNTY - B.H.D.		A	B	C	D	E	F	G
Legal Entity Number: 00056		Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 45 - Outreach			20					
1	Allocation Percentage	100.00%	100.00%					
2	Total Units		23,696					
3	Gross Cost	982,522	982,522					
4	Cost per Unit		41.46					
5	Non-Medi-Cal Units		23,696					
6	Non-Medi-Cal Costs	982,522	982,522					

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966A (10/04)

DETAIL COST REPORT

PAGE 1 OF 1
Fiscal Year 2002-2003

County: VENTURA
County Code: 56

County Code: 56			CR	CR	CR			
Legal Entity: VENTURA COUNTY - B.H.D.		A	B	C	D	E	F	G
Legal Entity Number: 00056		Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 60 - Support								
			20	30	40			
1	Allocation Percentage	100.00%	6.86%	26.27%	66.88%			
2	Total Units		2,536	9,713	24,032			
3	Gross Cost	666,311	45,693	175,007	445,611			
4	Cost per Unit		18.02	18.02	18.54			
5	Non-Medi-Cal Units (Same as Line 2)		2,536	9,713	24,032			
6	Non-Medi-Cal Costs (Same as Line 3)	666,311	45,693	175,007	445,611			

Fiscal Year 2002-2003

Entity Number - 00000			Mode 55			Total	Inpatient	Mode 05-All	Mode 15	Outpatient	Mode 15	Outpatient	
			S. F.'s 01-09	S. F.'s 11-19, 31-39	S. F.'s 21-29	MAA	Mode 05- Hospital	Other	Mode 10	Program (1)	Program (2)	Program (2)	Col. I + Col. J
1	Medi-Cal Costs	07/01/02 - 09/30/02					855,005						
1A		10/01/02 - 06/30/03					2,471,323		11,811	2,888,900	2,900,711	145,544	3,046,255
2	Medi-Cal SMA	07/01/02 - 09/30/02					775,087						
2A		10/01/02 - 06/30/03					40,529		20,602	9,810,106	9,830,709	504,546	10,335,254
3	Medi-Cal P. C.	07/01/02 - 09/30/02					2,234,328			3,216,033	3,256,563	228,276	3,482,839
3A		10/01/02 - 06/30/03					70,696		10,920,986	10,991,682	788,918	11,780,600	
4	Medi-Cal N. R.	07/01/02 - 09/30/02					809,574		40,572	3,611,346	3,651,918		3,651,918
4A		10/01/02 - 06/30/03					2,336,599		70,770	12,266,200	12,336,969		12,336,969
5	Medi-Cal Gross Reimbursement	07/01/02 - 09/30/02					775,087						
5A		10/01/02 - 06/30/03					2,234,328		11,811	2,888,900	2,900,711	145,544	3,046,255
6	Medicare/Medi-Cal Crossover Cost	07/01/02 - 09/30/02					217,197			12,294	12,294	385	12,679
6A		10/01/02 - 06/30/03					727,136			138,871	138,871	265	139,136
7	Medicare/Medi-Cal Crossover SMA	07/01/02 - 09/30/02					192,786			13,686	13,686	684	14,370
7A		10/01/02 - 06/30/03					645,414			154,597	154,597	445	155,042
8	Medicare/Medi-Cal Crossover P. C.	07/01/02 - 09/30/02					203,320			15,357	15,357		15,357
8A		10/01/02 - 06/30/03					680,680			173,537	173,537		173,537
9	Medicare/Medi-Cal Crossover N. R.	07/01/02 - 09/30/02											
9A		10/01/02 - 06/30/03											
10	Medicare/Medi-Cal Crossover Gross Reim.	07/01/02 - 09/30/02					192,786			12,294	12,294	385	12,679
10A		10/01/02 - 06/30/03					645,414			138,871	138,871	265	139,136
11	Total SD/MC + Crossover Gross Reim.	07/01/02 - 09/30/02					967,873		11,811	2,901,193	2,913,004	145,929	3,058,934
11A		10/01/02 - 06/30/03					2,879,742		20,602	9,948,977	9,969,579	504,811	10,474,391
12	Enhanced SD/MC (Children) Cost	07/01/02 - 09/30/02								2,413	2,413	1,485	3,898
12A		10/01/02 - 06/30/03								33,245	33,245	7,150	40,395
13	Enhanced SD/MC (Children) SMA	07/01/02 - 09/30/02								2,687	2,687	2,378	5,064
13A		10/01/02 - 06/30/03								37,010	37,010	12,626	49,636
14	Enhanced SD/MC (Children) P. C.	07/01/02 - 09/30/02								3,013	3,013		3,013
14A		10/01/02 - 06/30/03								41,480	41,480		41,480
15	Enhanced SD/MC (Children) N. R.	07/01/02 - 09/30											

County: VENTURA
County Code: 56
Legal Entity: VENTURA COUNTY - B.H.D.
Legal Entity Number: 00056

DETAIL COST REPORT

Mode: 05 - Other 24 Hour Services (All Other SFC)					A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
Data Type					SD/MC + Crossover Units			Breakdown of 2nd Period Units as a Percentage		SD/MC + Crossover Gross Reimbursement Costs Using Costs				Medi-Cal Patient and Other Payor Revenue				Net Direct Costs (Gross Reim. Costs - Revenue)				FFP Dollars			
Source Formula					From MH1901 Schedule B Supplemental			Calculated		From MH1966 MODE5(OTHR)				From MH1901 Schedule B				Calculated				Calculated			
Period								B / (B + C)	C / (B + C)	(D * I) (E * J)				(D * M) (E * M)				(F - J)	(G - K)	(H - L)	(O + P)	(51.40% * N)	(50.00% * Q)	(54.35% * R)	(S + T)
					1st Period	2nd Period/ Part I	2nd Period/ Part II	2nd Period/ Part I	2nd Period/ Part II	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period FFP \$ 07/01/02 - 09/30/02	2nd Period/ Part I FFP \$ 10/01/02 - 03/30/03	2nd Period/ Part II FFP \$ 04/01/02 - 06/30/03	Total 2nd Period FFP \$ 04/01/02 - 06/30/03
MH1966 Cost Report Column	MH1901 Sch. B Cost Rpt. Line #	Settlement Type	Mode	Service Function	Units 07/01/02 - 09/30/02	Units 10/01/02 - 03/30/03	Units 04/01/03 - 06/30/03	% of Units in 10/01/02 - 03/30/03	% of Units in 04/01/02 - 06/30/03	Costs 07/01/02 - 09/30/02	Costs 10/01/02 - 03/30/03	Costs 04/01/03 - 06/30/03	Costs 10/01/02 - 06/30/03	Revenue 07/01/02 - 09/30/02	Revenue 10/01/02 - 03/30/03	Revenue 04/01/03 - 06/30/03	Revenue 10/01/02 - 06/30/03	Net Costs 07/01/02 - 09/30/02	Net Costs 10/01/02 - 03/30/03	Net Costs 04/01/03 - 06/30/03	Net Costs 10/01/02 - 06/30/03	1st Period FFP %	2nd Period/ Part I FFP %	2nd Period/ Part II FFP %	
B	3	CR	05	85																		51.40%	50.00%	54.35%	

DETERMINATION OF SD/MC + CROSSOVER FFP DOLLARS
MH 1979 (10/04)

Fiscal Year 2002-2003

County: VENTURA
County Code: 56
Legal Entity: VENTURA COUNTY - B.H.D.
Legal Entity Number: 00056

Mode: 10 - Day Services					A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
Data Type					SD/MC + Crossover Units			Breakdown of 2nd Period Units as a Percentage		SD/MC + Crossover Gross Reimbursement Costs Using Costs				Medi-Cal Patient and Other Payor Revenue				Net Direct Costs (Gross Reim. Costs - Revenue)				FFP Dollars			
Source Formula					From MH1901 Schedule B Supplemental			Calculated		From MH1966 MODE10				From MH1901 Schedule B				Calculated				Calculated			
Period					1st Period	2nd Period/ Part I	2nd Period/ Part II	2nd Period/ Part I	2nd Period/ Part II	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period FFP \$ 07/01/02 - 09/30/02	2nd Period/ Part I FFP \$ 10/01/02 - 03/30/03	2nd Period/ Part II FFP \$ 04/01/02 - 06/30/03	Total 2nd Period FFP \$ 04/01/02 - 06/30/03
MH1966 Cost Report Column	MH1901 Sch. B Cost Rpt. Line #	Settlement Type	Mode	Service Function	Units 07/01/02 - 09/30/02	Units 10/01/02 - 03/30/03	Units 04/01/03 - 06/30/03	% of Units in 10/01/02 - 03/30/03	% of Units in 04/01/02 - 06/30/03	Costs 07/01/02 - 09/30/02	Costs 10/01/02 - 03/30/03	Costs 04/01/03 - 06/30/03	Costs 10/01/02 - 06/30/03	Revenue 07/01/02 - 09/30/02	Revenue 10/01/02 - 03/30/03	Revenue 04/01/03 - 06/30/03	Revenue 10/01/02 - 06/30/03	Net Costs 07/01/02 - 09/30/02	Net Costs 10/01/02 - 03/30/03	Net Costs 04/01/03 - 06/30/03	Net Costs 10/01/02 - 06/30/03	1st Period FFP % 51.40%	2nd Period/ Part I FFP % 50.00%	2nd Period/ Part II FFP % 54.35%	
B	4	CR	10	41																					
C	5	CR	10	95	352	614		100.00%		11,811	20,602		20,602					11,811	20,602		20,602	6,071	10,301		10,301
																			</						

DETERMINATION OF SD/MC + CROSSOVER FFP DOLLARS
MH 1970 (10/04)

Fiscal Year 2002-2003

County: VENTURA
County Code: 56
Legal Entity: VENTURA COUNTY - B.H.D.
Legal Entity Number: 00056

Mode: 15 - Outpatient (Program 1)					A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
Data Type					SD/MC + Crossover Units			Breakdown of 2nd Period Units as a Percentage		SD/MC + Crossover Gross Reimbursement Costs Using Costs				Medi-Cal Patient and Other Payor Revenue				Net Direct Costs (Gross Reim. Costs - Revenue)				FFP Dollars			
Source Formula					From MH1901 Schedule B Supplemental			Calculated		From MH1956 MODE15 (1)				From MH1901 Schedule B				Calculated				Calculated			
Period								B / (B + C) C / (B + C)		(D * I) (E * I)				(D * M) (E * M)				(F - J) (G - K) (H - L) (O + P)				(51.40% * N) (50.00% * O) (54.35% * P) (S + T)			
					1st Period	2nd Period/ Part I	2nd Period/ Part II	2nd Period/ Part I % of Units in 10/01/02 - 03/30/03	2nd Period/ Part II % of Units in 04/01/02 - 06/30/03	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period FFP \$ 07/01/02 - 09/30/02	2nd Period/ Part I FFP \$ 10/01/02 - 03/30/03	2nd Period/ Part II FFP \$ 04/01/02 - 06/30/03	Total 2nd Period FFP \$ 04/01/02 - 06/30/03
MH1956 Cost Report Column	MH1901 Sch. B Cost Rpt. Line #	Settlement Type	Mode	Service Function	Units 07/01/02 - 09/30/02	Units 10/01/02 - 03/30/03	Units 04/01/03 - 06/30/03	% of Units in 10/01/02 - 03/30/03	% of Units in 04/01/02 - 06/30/03	Costs 07/01/02 - 09/30/02	Costs 10/01/02 - 03/30/03	Costs 04/01/03 - 06/30/03	Costs 10/01/02 - 06/30/03	Revenue 07/01/02 - 09/30/02	Revenue 10/01/02 - 03/30/03	Revenue 04/01/03 - 06/30/03	Revenue 10/01/02 - 06/30/03	Net Costs 07/01/02 - 09/30/02	Net Costs 10/01/02 - 03/30/03	Net Costs 04/01/03 - 06/30/03	Net Costs 10/01/02 - 06/30/03	1st Period FFP % 51.40%	2nd Period/ Part I FFP % 50.00%	2nd Period/ Part II FFP % 54.35%	
B	6	CR	15	01	668,411	1,557,847	792,411	66.28%	33.72%	1,062,746	2,476,912	1,259,900	3,736,812					1,062,746	2,476,912	1,259,900	3,736,812	546,251	1,238,456	684,756	1,923,212
C	7	CR	15	10	124,908	262,836	150,302	63.62%	36.38%	255,822	538,310	307,831	845,140					255,822	538,310	307,831	845,140	131,492	269,155	167,306	436,461
D	8	CR	15	30	83,068	199,392	96,277	69.80%	30.20%	170,130	408,371	176,702	585,073					170,130	408,371	176,702	585,073	87,447	204,186	96,038	300,223
E	9	CR	15	40	302,128	659,929	316,945	67.56%	32.44%	618,763	1,351,589	649,129	2,000,718	20,768	31,592	15,172	46,764	598,015	1,319,997	633,957	1,953,954	307,380	659,999	344,556	1,004,554
F	10	CR	15	50	12,981	38,623	24,890	60.81%	39.19%	26,586	79,103	50,977	130,080					26,586	79,103	50,977	130,080	13,665	39,552	27,706	67,257
G	11	CR	15	60	119,987	295,480	162,613	64.50%	35.50%	455,838	1,122,735	617,880	1,740,615					455,838	1,122,735	617,880	1,740,615	234,301	561,368	335,815	897,186
H	12	CR	15	70	101,624	196,133	100,787	66.05%	33.95%	311,269	600,783	308,755	909,538					311,269	600,783	308,755	909,538	160,002	300,391	167,809	488,200
Totals										2,901,193	6,577,802	3,371,175	9,948,977	20,768	31,592	15,172	46,764	2,880,425	6,546,210	3,356,003	9,902,213	1,480,539	3,273,105	1,823,988	5,097,093
Equivalent values from MH1968										2,901,193			9,948,977	20,768			46,764								

DETAIL COST REPORT

County: VENTURA
County Code: 56
Legal Entity: VENTURA COUNTY - B.H.D.
Legal Entity Number: 00056

Mode: 15 - Outpatient (Program 1)					A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
Data Type					SD/MC + Crossover Units			Breakdown of 2nd Period Units as a Percentage			SD/MC + Crossover Gross Reimbursement Costs Using Costs				Medi-Cal Patient and Other Payor Revenue				Net Direct Costs (Gross Reim. Costs - Revenue)				FFP Dollars		
Source					From MH1901 Schedule B Supplemental			Calculated			From MH1966 MODE15 (1)				From MH1901 Schedule B				Calculated				Calculated		
Formula								B / (B + C)			D * I				O * M				F - J				(51.40% * N)		
								C / (B + C)			E * I				E * M				(H - L)				(O + P)		
Period					1st Period	2nd Period/ Part I	2nd Period/ Part II	2nd Period/ Part I	2nd Period/ Part II	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period FFP \$ 07/01/02 - 09/30/02	2nd Period/ Part I FFP \$ 10/01/02 - 03/30/03	2nd Period/ Part II FFP \$ 04/01/02 - 06/30/03	Total 2nd Period FFP \$ 04/01/02 - 06/30/03
MH1966	MH1901				Units 07/01/02 - 09/30/02	Units 10/01/02 - 03/30/03	Units 04/01/03 - 06/30/03	% of Units in 10/01/02 - 03/30/03	% of Units in 04/01/02 - 06/30/03	Costs 07/01/02 - 09/30/02	Costs 10/01/02 - 03/30/03	Costs 04/01/03 - 06/30/03	Costs 10/01/02 - 06/30/03	Revenue 07/01/02 - 09/30/02	Revenue 10/01/02 - 03/30/03	Revenue 04/01/03 - 06/30/03	Revenue 10/01/02 - 06/30/03	Net Costs 07/01/02 - 09/30/02	Net Costs 10/01/02 - 03/30/03	Net Costs 04/01/03 - 06/30/03	Net Costs 10/01/02 - 06/30/03	1st Period FFP %	2nd Period/ Part I FFP %	2nd Period/ Part II FFP %	
Cost Report	Sch. B Cost Rpt.	Settlement	Type	Mode	Service Function																				
								Crosscheck			OK				OK				OK				51.40%		

Model: 15 - Outpatient (Program 2)						A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
Data Type						SD/MC + Crossover Units			Breakdown of 2nd Period Units as a Percentage		SD/MC + Crossover Gross Reimbursement Costs				Medi-Cal Patient and Other Payor Revenue				Net Direct Costs (Gross Reim. Costs - Revenue)				FFP Dollars			
Source Formula						From MH1901 Schedule B Supplemental			Calculated		From MH1966 MODE15 [2]				From MH1901 Schedule B				Calculated				Calculated			
Period						1st Period	2nd Period/ Part I	2nd Period/ Part II	2nd Period/ Part I	2nd Period/ Part II	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period	2nd Period/ Part I	2nd Period/ Part II	Total 2nd Period	1st Period FFP \$ 07/01/02 - 09/30/02	2nd Period/ Part I FFP \$ 10/01/02 - 03/30/03	2nd Period/ Part II FFP \$ 04/01/02 - 06/30/03	Total 2nd Period FFP \$ 04/01/02 - 06/30/03
MH1966 Cost Report Column						Units 07/01/02 - 09/30/02	Units 10/01/02 - 03/30/03	Units 04/01/03 - 06/30/03	% of Units in 10/01/02 - 03/30/03	% of Units in 04/01/02 - 06/30/03	Costs 07/01/02 - 09/30/02	Costs 10/01/02 - 03/30/03	Costs 04/01/03 - 06/30/03	Costs 10/01/02 - 06/30/03	Revenue 07/01/02 - 09/30/02	Revenue 10/01/02 - 03/30/03	Revenue 04/01/03 - 06/30/03	Revenue 10/01/02 - 06/30/03	Net Costs 07/01/02 - 09/30/02	Net Costs 10/01/02 - 03/30/03	Net Costs 04/01/03 - 06/30/03	Net Costs 10/01/02 - 06/30/03	1st Period FFP %	2nd Period/ Part I FFP %	2nd Period/ Part II FFP %	Total 2nd Period FFP %
B	17	MHS	15	10	5,910	11,699	5,911	56.43%	33.57%	6,895	13,649	6,896	20,545					6,895	13,649	6,896	20,545	51.40%	50.00%	54.35%	51.40%	
C	18	MHS	15	40	25,795	63,635	31,405	66.96%	33.04%	32,808	80,935	39,943	120,878					32,808	80,935	39,943	120,878	16.863	40.467	21.709	62.176	
D	19	MHS	15	11																						
E	20	MHS	15	31	6,960	9,540	4,980	65.70%	34.30%	11,559	15,844	8,271	24,115					11,559	15,844	8,271	24,115	5.941	7.932	4.495	12.417	
F	21	MHS	15	41	1,890	1,815	1,379	56.80%	43.10%	3,226	2,957	2,740	5,198					3,226	2,957	2,740	5,198	1.658	1.478	1.218	2.696	
G	22	MHS	15	61	7,616	14,888	7,316	67.05%	32.95%	27,911	54,560	26,811	81,372					27,911	54,560	26,811	81,372	14.346	27.280	14.572	40.252	
H	23	MHS	15	69	3,460	18,465	8,810	67.70%	32.30%	9,927	52,976	25,276	78,252					9,927	52,976	25,276	78,252	5.102	26.488	13.737	40.225	
I	24	MHS	15	12	1,440	2,160	780	73.47%	26.53%	1,920	2,880	1,040	3,920					1,920	2,880	1,040	3,920	.987	1.440	.565	2.005	
J	25	MHS	15	32	4,620	7,890	5,640	58.04%	41.96%	7,220	12,190	8,814	21,004					7,220	12,190	8,814	21,004	3.711	6.095	4.791	10.866	
K	26	MHS	15	42	7,645	23,320	13,255	63.76%	36.24%	11,103	33,870	19,251	53,121					11,103	33,870	19,251	53,121	9.707	16.935	10.463	27.399	
L	27	MHS	15	13																						
M	28	MHS	15	43																						
N	29	MHS	15	53																						
O	30	MHS	15	14	1,260	4,500	1,380	76.53%	23.47%	1,464	5,229	1,604	6,833					1,464	5,229	1,604	6,833	.753	2.614	.872	3.486	
P																										

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

DETAIL COST REPORT

DETERMINATION OF SD/MC FFP %
MH 1978 (10/04)

Fiscal Year 2002-2003

County: VENTURA
County Code: 56

Legal Entity: VENTURA COUNTY - B.H.D.

Legal Entity Number: 00056		A	B	C	D	E	F
Data Type		Net Direct Costs (Gross Reim. Costs - Revenue)		FFP Dollars		Effective FFP%	
Source		MH1970s		MH1970s		Calculated	
		Column N	Column Q	Column R	Column U		
Formula						(C6 / A6)	(D6 / B6)
Period		1st Period	2nd Period	1st Period	2nd Period	1st Period	2nd Period
		07/01/02 - 09/30/02	10/01/02 - 06/30/03	07/01/02 - 09/30/02	10/01/02 - 06/30/03	07/01/02 - 09/30/02	10/01/02 - 06/30/03
	Mode						
1	05 - Hospital Inpatient (SFC 10-19)	752,696	2,092,622	386,886	1,078,712		
2	05 - Other 24 Hour Services (All Other SFC)						
3	10 - Day Services	11,811	20,602	6,071	10,301		
4	15 - Outpatient (Program 1)	2,880,425	9,902,213	1,480,539	5,097,093		
5	15 - Outpatient (Program 2)	145,929	504,811	75,008	259,874		
6	Totals	3,790,862	12,520,249	1,948,503	6,445,980		
7	Totals from MH1979	3,790,862	12,520,249	1,948,503	6,445,980		
8	Effective SD/MC FFP %					51.40%	51.48%

Crosscheck OK

OK

OK

OK

DETAIL COST REPORT

Fiscal Year 2002-2003

County: VENTURA
County Code: 56

[illegible]

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY
 CALCULATION OF SHORT-DOYLE/MEDI-CAL
 FOR FY 2002-2003 HOSPITAL ADMINISTRATIVE DAYS
 MH 1991 (10/04)

DEPARTMENT OF MENTAL HEALTH

Fiscal Year 2002-2003

COUNTY NAME: VENTURA		LEGAL ENTITY			NAME: VENTURA COUNTY - B.H.D.			
COUNTY CODE: 56					NUMBER: 00056			
A	B	C	D	E	F	G	H	I
Settlement Group	PROVIDER NUMBER	SMA RATE	PERIOD OF SERVICE	ADMIN DAYS	SUBTOTAL AMOUNT	PHYSICIAN COSTS	ANCILLARY COSTS	TOTAL AMOUNT
SD/MC		\$231.30	07/01/02 - 07/31/02	124	\$ 28,681	\$5,229	\$4,090	\$38,000
		\$236.38	08/01/02 - 09/30/02	340	\$ 80,369	\$14,338	\$11,215	\$105,922
		\$236.38	10/01/02 - 12/31/02	422	\$ 99,752	\$17,796	\$13,920	\$131,468
		\$236.38	01/01/03 - 06/30/03	742	\$ 175,394	\$31,290	\$24,475	\$231,159
							Sub Total:	\$ 506,550
Children EMC		\$231.30	07/01/02 - 07/31/02					
		\$236.38	08/01/02 - 09/30/02					
		\$236.38	10/01/02 - 12/31/02					
		\$236.38	01/01/03 - 06/30/03					
							Sub Total:	
Refugees EMC		\$231.30	07/01/02 - 07/31/02					
		\$236.38	08/01/02 - 09/30/02					
		\$236.38	10/01/02 - 12/31/02					
		\$236.38	01/01/03 - 06/30/03					
							Sub Total:	
Healthy Families		\$231.30	07/01/02 - 07/31/02					
		\$236.38	08/01/02 - 09/30/02					
		\$236.38	10/01/02 - 12/31/02					
		\$236.38	01/01/03 - 06/30/03					
							Sub Total:	
GRAND TOTAL					\$ 384,197	\$ 68,653	\$ 53,700	\$ 506,550